

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 10/1/2006 .

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	3,481,276	-0.3% #
16. Other _____		
Line of Insurance _____		

This is a nominal change only. EIC's only policy is retrospectively rated.

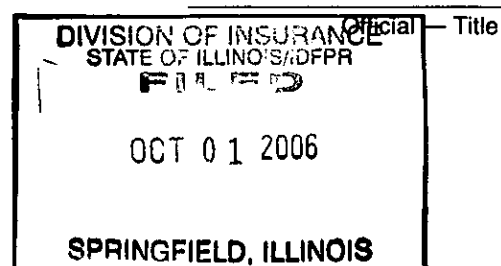
Does filing only apply to certain territory (territories) or certain classes? If so, specify No _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

Update of EIC's multiplier, since the last multiplier filing was effective 8/1/2001. _____

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Electric Insurance Company _____
Name of Company

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10-01-06 ~~8/1/2006~~

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>\$1,705,736</u>	<u>13.86%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: At this time, we would like to file
a loss cost multiplier of 1.378 for class code 8116.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): At this time we would
like to revise our loss cost multiplier to 1.723 for all classes except class code 8116 and our loss cost multiplier for this class to 1.378.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

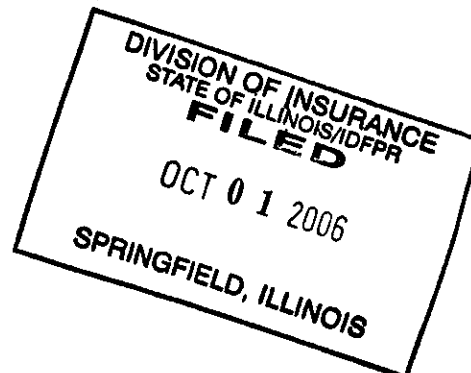
Farmland Mutual Insurance Company

Name of Company

Official - Title

Changed Effective date

TO: 10-01-06



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/01/2006

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>609,639</u>	<u>+25.3</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

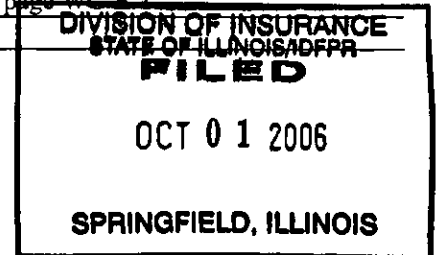
No, all classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of NCCI's loss costs and rating values contained in approval circular IL-2005-11 with a delayed effective date. Also revising our loss cost multiplier, as shown on revised Harco Exception page WC E 1

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.


Harco National Insurance Company
 Name of Company

Katie Cook
Senior Compliance Analyst
 Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 10-01-06 ~~8/1/2006~~

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	\$3,160,232	13.91%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: At this time, we would like to file
a loss cost multiplier of 1.198 for class code 8116.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): At this time we would
like to revise our loss cost multiplier to 1.498 for all classes except class code 8116 and our loss cost multiplier for this class to 1.198.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

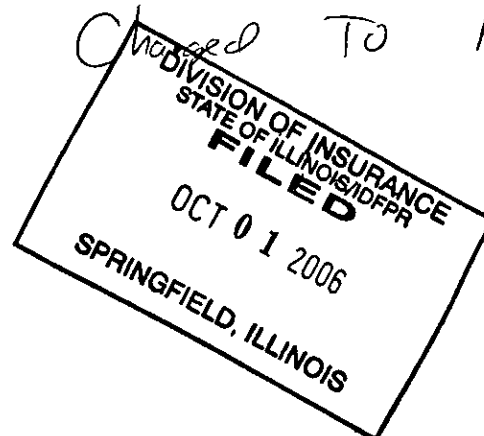
Nationwide Agribusiness Insurance Company

Name of Company

Official - Title

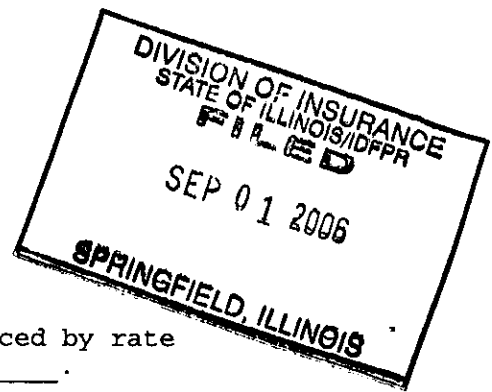
Effective Date

Changed TO 10-01-06



Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective 09/01/2006

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	6,146,820	-5.0%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: Class code: 8107, 8116, 8380 and 8748

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Revisions to class deviations per
attached.

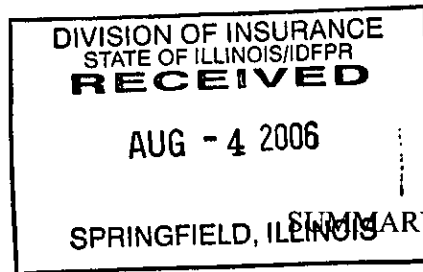
- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will
result from application of new rates.

Sentry Select Insurance Company
Name of Company

Janel Danczyk - Product Management Sr Analyst
Official - Title

H29219D

INS00106



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/1/2006 New Business
12/1/2006 Renewal

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	216,299	+0.02%
BOP Revisions: Manufacturing and Auto Service and Repair		
14. Crop Hail		
15. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:
No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Tenants Improvement & Betterments Rule Revision.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

